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Fill in this information to identify your case:						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						
Case number (if known):	Chapter you are filing under: ✓ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13					

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Huda First Name	First Name
	your driver's license or passport).	Middle Name	Middle Name
		Eid	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>8</u> <u>1</u> <u>1</u> <u>1</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx -	9xx - xx -

(ITIN)

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Del	otor 1	Huda Eid		Case number (if known)
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
and Em			✓ I have not used any business names or EIN	Is.
	(EIN) y	cation Numbers ou have used in t 8 years	Business name	Business name
		trade names and	Business name	Business name
	doing b	ousiness as names	Business name	Business name
5.	Where	you live		If Debtor 2 lives at a different address:
			15364 Weather Vane Lane Number Street	Number Street
				-
			Homer Glen IL 60491	
			City State ZIP Code Will	City State ZIP Code
			County	County
			If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
			Number Street	Number Street
			P.O. Box	P.O. Box
			City State ZIP Code	City State ZIP Code
6.		ou are choosing	Check one:	Check one:
	bankru	strict to file for ptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
			I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
P	art 2:	Tell the Court A	About Your Bankruptcy Case	
7.	Bankru	apter of the uptcy Code you	Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top of	lotice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.
	under	oosing to file	☑ Chapter 7	
			Chapter 11	
			Chapter 12	
			Chapter 13	

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Deb	otor 1 H	uda Eid					C	ase num	nber (if known)		
8.	How you	will pay the fee		court pay w	for more det vith cash, cas	ails about hov shier's check,	w you may pay.	Typicall . If your	y, if you are pay attorney is sub	ne clerk's office in your in the fee yourself mitting your paymen nad address.	, you may
							ments. If you dee in Installment			and attach the Appli	cation for
				By law than fee in	w, a judge mand the sinstallments	ay, but is not of official poverted. S). If you choose.	required to, wait y line that applie	ve your f es to you you mus	fee, and may do ur family size an at fill out the App	you are filing for Cha so only if your inco d you are unable to dication to Have the	me is less pay the
9.	•	e you filed for		No							
	last 8 yea	cy within the rs?		Yes.							
		•	Dist	rict _				When		Case number	
			Dist	rict				_ When	MM / DD / YYYY	Case number	
			Dist	rict				When	MM / DD / YYYY	Case number	
10.	Are any b	re any bankruptcy	M	No					WINT DD / TTTT		
	cases per	nding or being		Yes.							
	-	spouse who is this case with	ப Deb						Palationsh	nip to you	
	you, or by partner, o	v a business er by an		_							
	affiliate?	,	Dist	—				-	MM / DD / YYYY	Case number, if known	
			Deb	tor _					Relationsh	nip to you	
			Dist	rict _				When	MM / DD / YYYY	Case number,	
									MM/UU/YYYY	ir known	
11.	Do you re residence	•	\square	No.	Go to line 1		ed an eviction j	udament	t against you?		
			Ц	165.	-		ed an eviction j	uugmem	agairist you!		
					Yes. I		Statement Abou this bankruptcy		_	Against You (Form	101A)

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Debtor 1		Huda Eid	Case number (if known)						
Pa	art 3:	Report About Ar	y Bı	ısine	sses You Own as a	Sole Proprieto	r		
12.	-	u a sole proprietor full- or part-time ss?	<u> </u>		Go to Part 4. Name and location of bu	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				Name of business, if any Number Street				
If you have more than sole proprietorship, use separate sheet and attent to this petition.		prietorship, use a e sheet and attach it	ship, use a		City Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 10 Single Asset Real Estate (as defined in 11 U.S.C. § Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above		1 U.S.C. § 101(27A)) n 11 U.S.C. § 101(51 § 101(53A))		ode
13.	Chapte Bankru are you	u filing under r 11 of the ptcy Code and a s <i>mall busin</i> ess	can mos	set ap st rece	filling under Chapter 11, to ppropriate deadlines. If you nt balance sheet, statement f these documents do not	ou indicate that you ent of operations, ca	are a small business ash-flow statement, ar	debtor, you nd federal ir	nust attach your ncome tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under Ch	apter 11.				
		For a definition of small pusiness debtor, see		No.	I am filing under Chapte the Bankruptcy Code.	er 11, but I am NOT	a small business deb	tor accordin	ng to the definition in
	11 U.S.C. § 101(51D).			Yes.	I am filing under Chapte Bankruptcy Code.	er 11 and I am a sm	all business debtor ad	ccording to	the definition in the
Pa	art 4:	Report If You Ov	vn oı	r Hav	e Any Hazardous P	roperty or Any	Property That No	eeds Imn	nediate Attention
14.	propert alleged immine	o you own or have any roperty that poses or is lleged to pose a threat of nminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?				If immediate attention is	s needed, why is it n	eeded?		
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number Street			
					7	City		State	ZIP Code

Debtor 1 Huda Eid Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am not requi	ired to rece	ive a briefin	g about
credit counse			

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I

filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1	Huda Eid					Case number (if	know	n)
Ρ	art 6:	Answer These C	Questi	ons for Rep	porting Purp	os	es		
16.	What k have?	ind of debts do you	16a.	as "incurred No. Go	-		sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.	money for a No. Go	business or involve to line 16c.	est.	ness debts? Business debt ment or through the operation that are not consumer or bus	of th	
17.	Are yo Chapte	u filing under er 7?		No. I am no	ot filing under C	hap	ter 7. Go to line 18.		
	any exc exclud admini are pai availab	estimate that after empt property is ed and strative expenses d that funds will be ble for distribution ecured creditors?	✓		strative expense		•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do timate that you		1-49 50-99 100-199 200-999	 		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100 \$100,001-\$50 \$500,001-\$1 r	0,000		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100 \$100,001-\$50 \$500,001-\$1 r	0,000		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Huda Eid	Case number (if known)
Part 7:	Sign Below	
For you		I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.
I understand making a false statement, concealing property, or		
		X
		Executed on MM / DD / YYYY Executed on MM / DD / YYYY

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Debtor 1	Huda Eid	Case number (if known)
For your a represente	nttorney, if you are ed by one	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to
•	not represented by y, you do not need page.	the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. X Date O1/12/2018 MM / DD / YYYY
		Michael Forkan Printed name Michael Forkan Firm Name Forkan Law Office Number Street 2519 N California Avenue
		ChicagoIL60647CityStateZIP Code
		Contact phone (312) 532-2230 Email address mef@michaelforkan.com
		6284808 IL State

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	ill in thin inf	ammatian ta	idoutify your occo	and this filing.		
	III in this inf	ormation to	identify your case	and this filing:		
D	ebtor 1	Huda First Name	Middle Name	Eid Last Name	_	
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	_	
		nkruptcy Court f	or the: NORTHERN D	ISTRICT OF ILLINOIS	_	
	ase number f known)				<u> </u>	c if this is an ded filing
Of	ficial Form	106A/B				
So	chedule A	B: Proper	ty			12/15
the filir she	asset in the cang together, bo	ategory where y th are equally r . On the top of	ou think it fits best. B esponsible for supplyi any additional pages,	e as complete and accura ng correct information. If write your name and case	an asset fits in more than one ca te as possible. If two married po more space is needed, attach a number (if known). Answer eve al Estate You Own or Have	eople are separate ery question.
1.	-		al or equitable interest	in any residence, building	g, land, or similar property?	
	✓ No. Go t Yes. Wh	to Part 2. here is the prope	rty?			
2.		-		of your entries from Part 1 ite that number here	_	\$0.00
P	art 2: De	scribe Your	Vehicles			
	-		•	-	ey are registered or not? Includ G: Executory Contracts and Unexp.	•
3.	Cars, vans, ti	rucks, tractors,	sport utility vehicles, r	notorcycles		
	✓ No ☐ Yes					
4.					er vehicles, and accessories illes, motorcycle accessories	
	Yes					
5.		-	•	of your entries from Part 2 ite that number here	_	\$0.00
P	art 3: De	scribe Your	Personal and Hous	sehold Items		
Do	you own or ha	ve any legal or	equitable interest in a	ny of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	_	oods and furnis ajor appliances,	shings furniture, linens, china,	kitchenware		
	□ No ✓ Yes. Des	cribe Furni	ture and household	goods		\$1,000.00

Official Form 106A/B Schedule A/B: Property page 1

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Deb	tor 1	Huda Eid	Case number (if known)
7.	Electron Example	nics es: Televisions and radios; audio, video, stereo, and digital equipment; cor music collections; electronic devices including cell phones, cameras, m	
	□ No ▼ Yes	Describe Electronics	\$500.00
8.		bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, picture stamp, coin, or baseball card collections; other collections, memorabilia	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Describe	
9.		ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, p canoes and kayaks; carpentry tools; musical instruments	ool tables, golf clubs, skis;
	✓ No ☐ Yes	Describe	
10.	Firearm Example	s es: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes	. Describe	
11.	Clothes Example	es: Everyday clothes, furs, leather coats, designer wear, shoes, accessorie	es
	□ No ☑ Yes	Describe Apparel	\$500.00
12.	Jewelry Example	es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, h gold, silver	neirloom jewelry, watches, gems,
	✓ No ☐ Yes	Describe	
13.		m animals es: Dogs, cats, birds, horses	
	✓ No ☐ Yes	Describe	
14.	Any oth did not	er personal and household items you did not already list, including an list	y health aids you
	_	Give specific	
15.		dollar value of all of your entries from Part 3, including any entries for Part 3. Write the number here	
Pa	art 4:	Describe Your Financial Assets	
Do y	you own	or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you have in your wallet, in your home, in a safe deposit box, and petition	d on hand when you file your
	□ No ☑ Yes		Cash:

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Deb	btor 1 Huda Eid	Case number (if known)				
17.	Deposits of money Examples: Checking, savings, or other financial accounts; celebrokerage houses, and other similar institutions. It institution, list each.	·				
	✓ No ☐ Yes Institution name:					
18.	Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage f	irms, money market accounts				
	✓ No ☐ Yes Institution or issuer name:					
 Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture 						
	✓ No ☐ Yes. Give specific information about them	% of ownership:				
20.	Government and corporate bonds and other negotiable an Negotiable instruments include personal checks, cashiers' che Non-negotiable instruments are those you cannot transfer to s	d non-negotiable instruments ecks, promissory notes, and money orders.				
	✓ No ☐ Yes. Give specific information about them Issuer name:					
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), the profit-sharing plans	ift savings accounts, or other pension or				
	✓ No☐ Yes. List eachaccount separately. Type of account: Institution no	ame:				
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you Examples: Agreements with landlords, prepaid rent, public uti companies, or others					
	✓ No ☐ YesInstitution name	e or individual:				
23.	Annuities (A contract for a specific periodic payment of mone ✓ No	ey to you, either for life or for a number of years)				
24	Yes Issuer name and description: Interests in an education IRA, in an account in a qualified	ARI F program or under a qualified state tuition program				
24.	26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ADEL program, or under a quamied state tuttori program.				
		Separately file the records of any interests. 11 U.S.C. § 521(c)				
25.	Trusts, equitable or future interests in property (other than powers exercisable for your benefit	anything listed in line 1), and rights or				
	✓ No✓ Yes. Give specific information about them					
26.	Patents, copyrights, trademarks, trade secrets, and other in Examples: Internet domain names, websites, proceeds from r	• • •				
	Yes. Give specific information about them					

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Deb	tor 1	Huda Eid	Case number (if known)	
27.	Example No Yes	s, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association holdings, li . Give specific rmation about them	quor licenses, professional licens	ses
Mor	ney or pr	operty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	inds owed to you		
	abo you	. Give specific information ut them, including whether already filed the returns the tax years	Federal State:	
	۵۵		Local:	
29.	✓ No	es: Past due or lump sum alimony, spousal support, child support, maintena		settlement
	☐ Yes	. Give specific information	Alimony:	
			Maintenance:	
			Support:	
			Divorce settlement:	
			Property settlement	:
30.		mounts someone owes you es: Unpaid wages, disability insurance payments, disability benefits, sick pa compensation, Social Security benefits; unpaid loans you made to some		
	✓ No ☐ Yes	Give specific information		
31.		s in insurance policies es: Health, disability, or life insurance; health savings account (HSA); credit,	homeowner's, or renter's insurar	nce
	com	Name the insurance pany of each policy list its value	neficiary: Su	rrender or refund value:
32.	Any inte	erest in property that is due you from someone who has died the beneficiary of a living trust, expect proceeds from a life insurance police to receive property because someone has died		nender of fefund value.
	✓ No ☐ Yes	. Give specific information		
33.		against third parties, whether or not you have filed a lawsuit or made a es: Accidents, employment disputes, insurance claims, or rights to sue	demand for payment	
	✓ No ☐ Yes	Describe each claim		
34.	rights to	ontingent and unliquidated claims of every nature, including countercla o set off claims	ims of the debtor and	
	✓ No ☐ Yes	. Describe each claim		

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Deb	otor 1	Huda Eid	Case number (if known)	
35.	Any fin	ancial assets you did not already list		
	✓ No ☐ Yes	. Give specific information		
36.		dollar value of all of your entries from Part 4, including any entries		\$500.00
D.	art 5:	Describe Any Business-Related Property You Own or H	lave an Interest In I ist any	real estate in Part 1
	art 5.	Describe Any Business-Related Froperty Tod Own of the	lave an interest in. List any	real estate III I alt 1.
37.	Do you	own or have any legal or equitable interest in any business-related	property?	
		Go to Part 6. Go to line 38.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	ts receivable or commissions you already earned		
	✓ No ☐ Yes	. Describe		
39.		equipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fa desks, chairs, electronic devices	x machines, rugs, telephones,	
	✓ No ☐ Yes	. Describe		
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of	your trade	
	✓ No ☐ Yes	. Describe		
41.	Invento	ry		
	✓ No ☐ Yes	. Describe		
42.	Interes	s in partnerships or joint ventures		
	✓ No ☐ Yes	. Describe Name of entity:	% of ownership:	
43.	Custon	ner lists, mailing lists, or other compilations		
	✓ No Yes	. Do your lists include personally identifiable information (as define No Yes. Describe	ed in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No	. Give specific information.		
45.		dollar value of all of your entries from Part 5, including any entries d for Part 5. Write that number here		\$0.00

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Deb	otor 1	Huda Eid Cas	se number (if known)
Pa		Describe Any Farm- and Commercial Fishing-Related Propert If you own or have an interest in farmland, list it in Part 1.	ty You Own or Have an Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fish	ning-related property?
		Go to Part 7. s. Go to line 47.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm an	nimals les: Livestock, poultry, farm-raised fish	
	✓ No ☐ Yes		
48.	Crops	either growing or harvested	
	_	s. Give specific	
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No ☐ Yes	S	
50.	Farm a	nd fishing supplies, chemicals, and feed	
	✓ No ☐ Yes	3	
51.	Any far	m- and commercial fishing-related property you did not already list	
		s. Give specific prmation	
52.		e dollar value of all of your entries from Part 6, including any entries for paged for Part 6. Write that number here	
Pa	art 7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above
53.		have other property of any kind you did not already list? les: Season tickets, country club membership	
	✓ No ☐ Yes	s. Give specific information.	
54.	Add the	e dollar value of all of your entries from Part 7. Write that number here	→ \$0.00

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Debtor 1	Huda Eid	Case no	umber (if known)		
Part 8:	List the Totals of Each Part of this Form				
55. Part 1	: Total real estate, line 2		→		\$0.00
56. Part 2	2: Total vehicles, line 5	\$0.00			
57. Part 3	3: Total personal and household items, line 15	\$2,000.00			
58. Part 4	I: Total financial assets, line 36	\$500.00			
59. Part 5	5: Total business-related property, line 45	\$0.00			
60. Part 6	6: Total farm- and fishing-related property, line 52	\$0.00			
61. Part 7	7: Total other property not listed, line 54	+\$0.00			
62. Total	personal property. Add lines 56 through 61	\$2,500.00	Copy personal property total	+	\$2,500.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62				2,500.00

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Debtor 1	Huda		Eid					
	First Name	Middle Name						
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name					
-		he: NORTHE l	RN DISTRICT OF I	LLIN	iois	_	Check if this is an	
Case number (if known)						L	amended filing	
Official Form	n 106C							
Schedule C	: The Proper	ty You Cl	aim as Exemp	ot				04/
Using the property space is needed,	you listed on Sched	dule A/B: Prope this page as m	erty (Official Form 106	6A/B)	as your source, list	the property	e for supplying correct information that you claim as exemporn the top of any additionations.	ot. If mo
s to state a spec xempted up to t eceive certain be xemption of 100 roperty is deter	ific dollar amount a he amount of any a enefits, and tax-exe l% of fair market va	as exempt. Alt pplicable state empt retirement lue under a la at amount, you	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe ur exemption would	clair cemp imite mpti	n the full fair mark tionssuch as tho d in dollar amount on to a particular d	et value of t se for health . However, lollar amour	n aids, rights to if you claim an nt and the value of the	
i dit ii	chary the Frope	ity Tou Olu	iii do Excilipt					
. Which set of	exemptions are yo	ou claiming?	Check one only,	even	if your spouse is fili	ng with you.		
سخا	claiming state and fe claiming federal exe		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	S.C. § 522(b)(3)			
. For any prop	perty you list on Sc.	hedule A/B th	at you claim as exen	npt, 1	ill in the information	on below.		
-	of the property and at lists this property		Current value of the portion you own		ount of the mption you claim	Specifi	c laws that allow exem	ption
			Copy the value from Schedule A/B		eck only one box for h exemption			
Brief description:			\$1,000.00	$\overline{\mathbf{Q}}$	\$1,000.00	735 IL	CS 5/12-1001(b)	
urniture and h	ousehold goods				100% of fair marke	_	(.,	
ine from <i>Schedu</i>	le A/B: 6				value, up to any applicable statutor limit	у		
Brief description:			\$500.00	$\overline{\mathbf{V}}$	\$500.00	735 IL	CS 5/12-1001(b)	
Electronics					100% of fair marke	et .		
ine from <i>Schedu</i>	le A/B: 7				value, up to any applicable statutor limit	у		
. Are you clai	ming a homestead (exemption of	more than \$160,375?	?				
•	-	-	ears after that for cas		ed on or after the da	ate of adjusti	ment.)	
☑ No								
· ·		operty covered	by the exemption with	hin 1	215 days before yo	u filed this ca	ase?	

☐ Yes

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Debtor 1	Huda Eid	Case number (if known)			
Part 2:	Additional Page				
	iption of the property and line on \(\begin{align*} B \text{ that lists this property} \end{align*}	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption		
Brief descrip Apparel Line from So	otion: chedule A/B: 11	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)	
Brief descrip Cash Line from So	otion: chedule A/B: 16	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	

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Fill in this inf	ormation to identif	y your case:				
Debtor 1	Huda		Eid			
	First Name M	liddle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name M	liddle Name	Last Name			
United States Bar	nkruptcy Court for the: N	IORTHERN DIST	RICT OF ILLINOIS	<u>s</u>		
Case number (if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	Creditors Who	Have Claim	s Secured by	Property		12/15
correct informatio On the top of any 1. Do any credit No. Che Yes. Fill	nd accurate as possible in. If more space is need additional pages, write fors have claims secure in all of the information of the table to the table to the table to the table tabl	eded, copy the Add your name and ca ed by your propert his form to the court below.	ditional Page, fill it on the second	out, number the entr n).	ies, and attach it to thi	s form.
creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the			Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Creditor's name		secures the clair				
Number Street		-				
		- As of the date vo	ou file, the claim is:	Check all that apply		
City	State ZIP Code	Contingent Unliquidated	ou me, me ciami is.	опеск ан шасарру.		
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)						
_	Check if this claim relates to a community debt					
Date debt was inc	urred	_ Last 4 digits of a	ccount number			
	ue of vour entries in Co					

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$0.00

that number here:

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				_		
Fill in this inf	ormation to ide	entify your ca	ase:			
Debtor 1	Huda		Eid	1		
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
I I I I I I I I I I I I I I I I I I I		. NODTHED	N DISTRICT OF ILL INOIS			
United States Bai	nkruptcy Court for t	ine: NORTHER	N DISTRICT OF ILLINOIS			
Case number				Г	7 Check if this	is an
(if known)					amended filir	
Official Form	106E/F			-		
	-	147 - 11-				
Schedule E/	F: Creditors	Who Have	Unsecured Claims			12/15
Do not include an If more space is n to this page. On t	y creditors with pa leeded, copy the P the top of any addi	artially secured Part you need, fil itional pages, w	and on Schedule G: Executory Co claims that are listed in Schedule Il it out, number the entries in the rite your name and case number secured Claims	D: Creditors Who I boxes on the left.	Hold Claims Sec	cured by Property.
1. Do any credit	tors have priority	unsecured clain	ns against you?			
			agamer your			
✓ No. Got	or art 2.					
claim. For ea show both prio more space is claim, list the	List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet. Total claim Priority Nonpriority					
					amount	amount
2.1						
				-	-	
Priority Creditor's Nam	ne		Last 4 digits of account number		-	
Number Street			When was the debt incurred?		_	
			As of the date you file, the claim	is: Check all that ap	ply.	
			Contingent	·	. ,	
			Unliquidated Disputed			
City		IP Code	Disputed			
Who incurred the	debt? Check on	ne.	Type of PRIORITY unsecured cla	aim:		
Debtor 1 only Debtor 2 only			Domestic support obligations Taxes and certain other debts	you owe the governm	nent	
Debtor 1 and D	•		Claims for death or personal in		iioiit	
—	the debtors and ar		intoxicated			
	claim is for a com	munity debt	Other. Specify			
Is the claim subje	ct to offset?					
□ No □ Yes						

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Debtor 1 Hu	ıda Eid	Case number (if known)	
Part 2:	ist All of Your NONPRIORIT	TY Unsecured Claims	
No. You Yes 4. List all of y If a creditor type of clair Part 3. If m 4.1 Amex Nonpriority Creditor Po Box 29787 Number Street Fort Lauderda City Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and At least one	rour nonpriority unsecured claims has more than one nonpriority unsern it is. Do not list claims already independent of the second for nonpriority described for nonpriority and the second for nonpriority described for nonprior	t. Submit this form to the court with your other schedules. sin the alphabetical order of the creditor who holds each claim. coured claim, list the creditor separately for each claim. For each claim listed, cluded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2. Last 4 digits of account number 0 1 4 3 When was the debt incurred? 12/1996 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	•
At least one	1 t t t t t t t t t t t t t t t t t t t	Last 4 digits of account number 7 8 3 3 When was the debt incurred? 12/06/1996 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	\$0.00

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Debtor 1 Huda Eid	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$0.00
Amex	Last 4 digits of account number 7 0 8 3	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 12/06/1996	
Po Box 297871 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Fort Lauderdale FL 33329		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a congration agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Credit Card	
No No		
Yes		
4.4	Lead A Belle of account number . T. O. A. O.	\$0.00
Nonpriority Creditor's Name	_ Last 4 digits of account number 7 9 1 3	
Po Box 297871	When was the debt incurred? 12/06/1996	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Fort Loudondolo El 22220	Disputed	
Fort Lauderdale FL 33329 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.5		\$5,648.00
Bk Of Amer	Last 4 digits of account number 7 5 9 9	Ψο,ο τοιοο
Nonpriority Creditor's Name	When was the debt incurred? 12/2011	
Po Box 982238 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
El Paso TX 79998	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		

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Debtor 1 Huda Eid	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$0.00
Capital One	Last 4 digits of account number 3 5 9 6	· · · · · · · · · · · · · · · · · · ·
Nonpriority Creditor's Name	When was the debt incurred? 08/01/2014	
15000 Capital One Dr Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Richmond VA 23238	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	3.34.1.34.14	
☑ No		
Yes		
4.7		
	Last A Parks of account numbers A O O T	\$0.00
Capital One Nonpriority Creditor's Name	_ Last 4 digits of account number 4 9 9 7	
15000 Capital One Dr	When was the debt incurred? 12/27/1996	
Number Street	As of the date you file, the claim is: Check all that apply.	
-	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Richmond VA 23238		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a consection agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.8		\$7,925.00
Cavalry Portfolio Serv	Last 4 digits of account number 7 2 7 5	
Nonpriority Creditor's Name	When was the debt incurred? 03/2017	
Po Box 27288 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Tempe AZ 85285	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
No No		
Yes		

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Debtor 1 Huda Eid	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$5,196.00
Cavalry Portfolio Serv	Last 4 digits of account number 8 2 6 1	
Nonpriority Creditor's Name	When was the debt incurred? 09/2016	
Po Box 27288 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Tempe AZ 85285	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.10		\$3,772.00
Cavalry Portfolio Serv	Last 4 digits of account number 8 3 1 5	
Nonpriority Creditor's Name Po Box 27288	When was the debt incurred? 03/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Tempe AZ 85285	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset?		
☑ No □ Yes		
4.11		\$85.00
Comenity Bank/carsons	Last 4 digits of account number 8 2 0 4	
Nonpriority Creditor's Name Po Box 182789	When was the debt incurred? 05/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Columbus OH 43218		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset? ✓ No		
✓ NO Yes		

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Debtor 1 Huda Eid	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number ther previous page.	m sequentially from the	Total claim
4.12		\$1,410.00
Credit First N A	Last 4 digits of account number 2 1 5 7	
Nonpriority Creditor's Name	When was the debt incurred? 05/2013	
6275 Eastland Rd Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Brookpark OH 44142	□ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.13		\$405.00
Kohls/capone	_ Last 4 digits of account number <u>8 6 2 7</u>	
Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr	When was the debt incurred? 11/2011	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Menomonee Falls WI 53051		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No		
Yes		
4.14		\$1,018.00
Midland Funding	Last 4 digits of account number 0 8 7 9	
Nonpriority Creditor's Name	When was the debt incurred? 11/2014	
2365 Northside Dr Ste 30 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
San Diago CA 00400	Disputed	
San Diego CA 92108 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Factoring Company Account	
Is the claim subject to offset? ✓ No		
Yes		

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Debtor 1 Huda Eid	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.15		\$597.00
Midland Funding	Last 4 digits of account number 9 2 2 5	
Nonpriority Creditor's Name	When was the debt incurred? 10/2015	
2365 Northside Dr Ste 30 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
San Diego CA 92108	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Factoring Company Account	
Is the claim subject to offset?		
✓ No Yes		
4.16		\$0.00
Syncb/jcp	Last 4 digits of account number5	
Nonpriority Creditor's Name Po Box 965007	When was the debt incurred? 03/2013	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Orlando FL 32896 City State ZIP Code	-	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Charge Account	
✓ No		
Yes		
4.17		\$0.00
Syncb/jcp	Last 4 digits of account number 1 8 4 6	
Nonpriority Creditor's Name Po Box 965007	When was the debt incurred? 10/28/2011	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Orlando FL 32896		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset? ✓ No		
☐ Yes		

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Debtor 1	Huda Eid	Case number (if known)	Case number (if known)			
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	n Page			
After listin previous p	g any entries on this page, number the page.	m sequentially from the	Total claim			
Syncb/wa Nonpriority C Po Box 90 Number	reditor's Name	Last 4 digits of account number 1 4 2 6 When was the debt incurred? 1/03/2013 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated				
Debtor Debtor Debtor At leas Check	•	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account				

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Debtor 1	Huda Eid	Case number (if known)	
Part 4:	Add the Amounts for Each Type of Unsecured Claim		

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom r art r	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. -	\$26,056.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$26,056.00

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Fill in this inf						
Debtor 1	Huda First Name	Middle Name	Eid Last Name			
Debtor 2	Filst Naille	Middle Name	Lastinalle			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court fo	r the: NORTHERN D	ISTRICT OF ILLINOI	<u>s</u>		
Case number						
(if known)					_	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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					•			
Fi	I in this inf	ormation to ide	ntify your case:					
De	btor 1	Huda First Name	Middle Name	Eid Last Name				
	btor 2							
(Sp	oouse, if filing)	First Name	Middle Name	Last Name				
Un	ited States Bar	nkruptcy Court for the	e: NORTHERN DIS	STRICT OF ILLINOIS				
	se number				☐ Check if this is an			
(if I	known)				amended filing			
					•			
Off	icial Form	106H						
Scl	hedule H:	Your Codeb	tors			12/15		
	e. On the top	of any Additional P	ages, write your nar		the left. Attach the Additional Page to this vn). Answer every question. e as a codebtor.)			
2.								
		your spouse, forme	r spouse, or legal equ	uivalent live with you at the tim	ne?			
3.	person show creditor on S	n in line 2 again as chedule D (Official	a codebtor only if the	nat person is a guarantor or ule E/F (Official Form 106E/F	or if your spouse is filing with you. List the cosigner. Make sure you have listed the F), or <i>Schedule G</i> (Official Form 106G). Use			

Column 1: Your codebtor Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this in	formation to i	identify your case:						
Debtor 1	Huda		Eid					
	First Name	Middle Name	Last Name			Che	eck if this is:	
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last Name			- 🗖	An amended filing	
	Bankruptcy Court		DISTRICT OF IL	LINO	IS		A supplement showing	postpetition
Case number	Barikraptoy Court	101 tile. <u>11011111111</u>				-	chapter 13 income as	of the following date:
(if known)	-			_			MM / DD / YYYY	_
Official Forn	n 106l							
Schedule I:	Your Incor	ne						12/15
responsible for s include informat about your spou your name and c	supplying correction about your spaces. If more spaces	cossible. If two married tinformation. If you are pouse. If you are separe is needed, attach a senown). Answer every comment	e married and not rated and your spo eparate sheet to th	filing j use is	ointly, an not filing	d your g with y	spouse is living with y ou, do not include info	ou, ormation
Fill in your entry information.	employment		Dobtor 1				Dobtor 2 or non-filir	ag enouso
,	more than one	Francisco de la constanta de l	Debtor 1				Debtor 2 or non-filir	ig spouse
job, attach a with informat	separate page tion about	Employment status	☐ Employed✓ Not employed	ed			✓ Employed✓ Not employed	
additional en	nployers.	Occupation	Unemployed				Cashier	
Include part- or self-emplo	time, seasonal, byed work.	Employer's name					_	
Occupation i	•	Employer's address						
student or ho applies.	omemaker, if it		Number Street				Number Street	
							_	
			City		State Zip	Code	City	State Zip Code
			•		State Zip	Code	City	State Zip Code
		How long employed the	here?					
Part 2: G	ive Details Ab	out Monthly Incom	е					
	y income as of th unless you are se	ne date you file this form parated.	n. If you have noth	ing to	report for a	any line	, write \$0 in the space.	Include your
		e more than one employ arate sheet to this form.	er, combine the info	ormatio	on for all e	mploye	rs for that person on the	lines below. If
					For Debto	or 1	For Debtor 2 or non-filing spouse	_
		alary, and commissions d monthly, calculate what		2.		\$0.00	\$3,500.00	
3. Estimate an	d list monthly ov	ertime pay.		3. +		\$0.00	\$0.00	
4. Calculate gr	ross income. Ad						\$3,500.00	

Official Form 106I Schedule I: Your Income page 1

Deb	ioi i	Huda Eld		_ Case num	oer (if kno	wn)		
				For Debtor 1	For Debt	tor 2 or g spouse)	
	Copy lir	ne 4 here	4.	\$0.00	\$3,	500.00	_	
5.	List all	payroll deductions:						
	5a. Ta	x, Medicare, and Social Security deductions	5a.	\$0.00		\$0.00		
	5b. Ma	indatory contributions for retirement plans	5b.	\$0.00		\$0.00		
	5c. Vo	luntary contributions for retirement plans	5c.	\$0.00		\$0.00		
	5d. Re	quired repayments of retirement fund loans	5d.	\$0.00		\$0.00		
	5e. Ins	surance	5e.	\$0.00		\$0.00		
	5f. Do	mestic support obligations	5f.	\$0.00		\$0.00		
	5g. Un	ion dues	5g.	\$0.00		\$0.00		
		ner deductions. ecify:	5h.	+\$0.00		\$0.00		
6.	Add the 5g + 5h.	e payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +	6.	\$0.00		\$0.00		
7.	Calcula	te total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$3 ,	500.00		
8.	List all	other income regularly received:						
		t income from rental property and from operating a siness, profession, or farm	8a.	\$0.00		\$0.00		
	gro	ach a statement for each property and business showing ass receipts, ordinary and necessary business expenses, and a total monthly net income.						
	8b. Inte	erest and dividends	8b.	\$0.00		\$0.00		
		mily support payments that you, a non-filing spouse, or a pendent regularly receive	8c.			\$0.00		
		lude alimony, spousal support, child support, maintenance, orce settlement, and property settlement.						
	8d. Un	employment compensation	8d.	\$0.00		\$0.00		
	8e. So	cial Security	8e.	\$0.00		\$0.00		
	8f. Oth	her government assistance that you regularly receive						
	cas (be	clude cash assistance and the value (if known) or any non- sh assistance that you receive, such as food stamps enefits under the Supplemental Nutrition Assistance Program) thousing subsidies.						
	Spe	ecify:	8f.	\$0.00		\$0.00		
	8g. Per	nsion or retirement income	8g.	\$0.00		\$0.00		
	8h. Oth	her monthly income.	_	 _				
	Spe	ecify:	8h.	+\$0.00		\$0.00		
9.	Add all	other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00		\$0.00		
10	Calcula	te monthly income. Add line 7 + line 9.	10.	\$0.00 +	¢3	500.00]_[\$3,500.00
10.	Add the	entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$0.00	<u>_</u>	300.00] = [.	45,500.00
11.	Include	I other regular contributions to the expenses that you list in S contributions from an unmarried partner, members of your househor relatives.			roommate	es, and ot	her	
	Do not i	nclude any amounts already included in lines 2-10 or amounts tha	t are	not available to pay ex	penses lis	sted in Sc	hedu	le J.
	Specify:					_ 11.	+	\$0.00
12.		amount in the last column of line 10 to the amount in line 11. Write that amount on the Summary of Your Assets and Liabilities ies.				12.		\$3,500.00 combined nonthly income
13.	Do you	expect an increase or decrease within the year after you file to	his fo	orm?			•••	
	√ No.	None.						
	Yes	s. Explain:						

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F	ill in this inforn	nation to ide	entif	y your case:			Chr	eck if this	io	
	Debtor 1	Huda			Eid				ended filing	
		First Name		Middle Name	Last Na	ame	ᆸ	A supp	lement showing	• •
	Debtor 2 (Spouse, if filing)	First Name		Middle Name	Last Na	ame		chapter followin	· 13 expenses a g date:	as of the
	United States Bankı	runtov Court for	tha	NORTHERN DIST	FRICT O	E II I INOIS				<u></u>
	Case number	upicy Court for	uic.	HORTHERN DIO	inioi o	I ILLINOIO		MM / D	D / YYYY	
	(if known)									
0	fficial Form 10	<u> 165</u>								
S	chedule J: Yo	our Expen	ses	5						12/15
nai	rrect information. I	f more space i	s ned Ansv	e. If two married peo eded, attach another wer every question. hold						
1.	Is this a joint cas	e?								
	No □ Ye	Debtor 2 live in	st file	parate household? e Official Form 106J-2,	Expense	s for Separate Housel	nold o	f Debtor	2.	
2.	Do you have dep	endents?	_	No Yes. Fill out this infor	mation	Dependent's relation		p to	Dependent's	Does dependent
	Do not list Debtor Debtor 2.	1 and		for each dependent		Debtor 1 or Debtor	2		age	live with you?
	Debiol 2.					Child			6	□ No - ☑ Yes
	Do not state the denames.	ependents'				Child			12	□ No □ Yes
						Child			21	□ No - ☑ Yes
						Child			20	□ No - ☑ Yes
										□ No
_	_			_						− ∏ Yes
3.	Do your expense expenses of peopyourself and you	ole other than	,	✓ No ☐ Yes						
F	Part 2: Estima	ate Your On	goir	ng Monthly Expe	nses					
to		of a date after	the	ruptcy filing date unl bankruptcy is filed.	-	-			-	
				government assista Schedule I: Your Inc					Your expens	ses
4.				nses for your resider any rent for the ground				2	1	\$1,650.00
	If not included in	line 4:								
	4a. Real estate ta	axes						4	ła	\$625.00
	4b. Property, hor	neowner's, or re	enter'	s insurance				4	4b	\$100.00
	4c. Home mainte	nance, repair,	and u	ıpkeep expenses				4	4c	
	4d. Homeowner's	s association or	cond	dominium dues				2	1d	

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Deb	etor 1 Huda Eid	Case number (if known)	ase number (if known)			
		Your expenses				
5.	Additional mortgage payments for your residence, such as home equity loans	5.				
6.	Utilities:					
	6a. Electricity, heat, natural gas	6a.	\$220.00			
	6b. Water, sewer, garbage collection	6b	\$200.00			
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$50.00			
	6d. Other. Specify:	6d				
7.	Food and housekeeping supplies	7.	\$600.00			
8.	Childcare and children's education costs	8.				
9.	Clothing, laundry, and dry cleaning	9.				
10.	Personal care products and services	10.				
11.	Medical and dental expenses	11.				
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.				
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.				
14.	Charitable contributions and religious donations	14.				
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.					
	15a. Life insurance	15a				
	15b. Health insurance	15b.				
	15c. Vehicle insurance	15c				
	15d. Other insurance. Specify:	15d.				
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.				
17.	Installment or lease payments:					
	17a. Car payments for Vehicle 1	17a				
	17b. Car payments for Vehicle 2	17b				
	17c. Other. Specify:	17c				
	17d. Other. Specify:	17d.				
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.				
19.	Other payments you make to support others who do not live with you. Specify:	19.				

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Deb	tor 1	Huda Eid	Case number (if known)	
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	. Specify:	21. + _	
22.	Calcu	late your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$3,445.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$3,445.00
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,500.00
	23b.	Copy your monthly expenses from line 22c above.	23b. –	\$3,445.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$55.00
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you fil	le this form?	
		cample, do you expect to finish paying for your car loan within the year or do you expent to increase or decrease because of a modification to the terms of your mortgage	, ,	
		No.		
	□ <i>/</i>	Yes. Explain here: None.		

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Fill in this inf	ormation to	identify your case	:	
Debtor 1	Huda		Eid	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
Case number (if known)	nkruptcy Court fo	or the: Northern L	DISTRICT OF ILLINOIS	☐ Check if this is an amended filing
Official Form	106Sum			
Summary of	Your Ass	ets and Liabilit	ies and Certain S	tatistical Information
correct informatio	n. Fill out all o	f your schedules first;	then complete the inform	er, both are equally responsible for supplying ation on this form. If you are filing amended

Sı	immary of Your Assets and Liabilities and Certain Statistical Information	12/15
cor	as complete and accurate as possible. If two married people are filing together, both are equally responsible f rect information. Fill out all of your schedules first; then complete the information on this form. If you are filin edules after you file your original forms, you must fill out a new Summary and check the box at the top of this	g amended
Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$2,500.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$2,500.00
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$26,056.00
	Your total liabilities	\$26,056.00
P	art 3: Summarize Your Income and Expenses	_
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,500.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,445.00
	Copy your monthly expenses from line 220 or Schedule 3	

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family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and this form to the court with your other schedules. B. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as	Deb	tor 1	Huda Eid	Case number (if known)				
No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other so Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and this form to the court with your other schedules. You have nothing to report on this part of the form. Check this box and this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as	Pa	art 4:	Answer These Questions for Administrative and Statistic	cal Records				
Yes 7. What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a persona family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00	6.	Are y	ou filing for bankruptcy under Chapters 7, 11, or 13?					
Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and this form to the court with your other schedules. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as 90.00		ш,		ubmit this form to the court with you	ur other schedules.			
family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and this form to the court with your other schedules. B. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as	7.	What	kind of debt do you have?					
this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00								
Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00		_		n this part of the form. Check this	box and submit			
From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as Total claim 50.00 \$0.00 \$0.00 \$0.00	В.	*						
From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00	9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:						
9a. Domestic support obligations. (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00				Total claim				
9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as		From	Part 4 on Schedule E/F, copy the following:					
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00		9a. I	Domestic support obligations. (Copy line 6a.)	\$0.00	<u>0</u>			
9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00		9b	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	0_			
9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00		9c. (Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	<u>0</u>			
9e. Obligations ansing out of a separation agreement of divorce that you did not report as		9d. \$	Student loans. (Copy line 6f.)	\$0.00	0			
phonty ciaints. (Copy line og.)			Obligations arising out of a separation agreement or divorce that you did not repriority claims. (Copy line 6g.)	eport as \$0.0	0			

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

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		2000	amont rago or	
Fill in this inf	formation to	identify your case	:	
Debtor 1	Huda		Eid	
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	_
Case number				Check if this is an
(if known)				amended filing
Official Form	106Dec			
		Individual Debt	or's Schedules	12/15
If two married peo	ople are filing to	gether, both are equal	ly responsible for supply	ing correct information.
You must file this	form whenever	vou file bankruntov s	chedules or amended sch	nedules. Making a false statement,
concealing prope	rty, or obtaining	money or property by	fraud in connection with	n a bankruptcy case can result in fines up to
\$250,000, or impr	isonment for up	to 20 years, or both.	18 U.S.C. §§ 152, 1341, 1	519, and 3571.
Sig	gn Below			
Did you pay	or agree to nav	someone who is NOT	an attorney to help you fi	ill out bankruptcy forms?
_ N	or agree to pay	Someone who is NOT	an attorney to help you n	in our banki upicy forms:
☑ No				
Yes. N	ame of person _			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
				zoora anon, and orginatare (emeral reministry).
Under penalt	ty of perjury, I d	eclare that I have read	the summary and schedu	ules filed with this declaration and that they are
true and corr			•	•
	500			

Signature of Debtor 2

MM / DD / YYYY

Date

Date <u>01/12/2018</u> MM / DD / YYYY Case 18-00992 Doc 1 Filed 01/12/18 Entered 01/12/18 17:04:30 Desc Main Document Page 38 of 53

Fill in this in	formation to	identify your case	:			
Debtor 1	Huda		Eid			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court f	or the: NORTHERN D	ISTRICT OF ILLINO	<u>is</u>		
Case number					Observative transfer and	
(if known)					Check if this is an amended filing	
Official Form	107					
Statement o	of Financia	II Affairs for ind	ividuals Filing	for Bankruptcy		04/1
Part 1: Gi	ve Details Ab	oout Your Marital S	Status and Where '	You Lived Before		
1. What is your	current marital	l status?				
Married						
☐ Not marri	ied					
2. During the la	ast 3 years, have	e you lived anywhere o	ther than where you l	ive now?		
☑ No						
Yes. List	t all of the places	s you lived in the last 3 y	ears. Do not include w	here you live now.		
(Community _I		<i>and territorie</i> s include Ari	• .	nt in a community property , Louisiana, Nevada, New M	•	
☑ No						
Yes. Ma	ke sure you fill o	ut Schedule H: Your Co	debtors (Official Form 1	06H).		

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Debtor 1	Huda Eid		Case nu	mber (if known)	
Part 2:	Explain the Sources of	Your Income			
4. Did yo Fill in If you □ N	ou have any income from employ the total amount of income you reco are filing a joint case and you have	ment or from operating a bu eived from all jobs and all bus	inesses, including par	t-time activities.	endar years?
⊘ Y	es. Fill in the details.	**			
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	uary 1 of the current year until ou filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business		☐ Wages, commissions, bonuses, tips☐ Operating a business	
For the las	st calendar year:	☐ Wages, commissions, bonuses, tips		☐ Wages, commissions, bonuses, tips	
(January 1	to December 31, 2017) YYYY	Operating a business		Operating a business	
For the ca	lendar year before that:	Wages, commissions,		Wages, commissions,	
(January 1	to December 31, 2016)	bonuses, tips Operating a business		bonuses, tips Operating a business	
Includ unem and gand gand	ou receive any other income during the income regardless of whether that ployment; and other public benefit pambling and lottery winnings. If you are 1.	at income is taxable. Example payments; pensions; rental incurare in a joint case and you have	s of other income are ome; interest; dividen ave income that you re	alimony; child support; Socia ds; money collected from law eceived together, list it only o	vsuits; royalties;
□ N	-			,	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
	uary 1 of the current year until ou filed for bankruptcy:				
	st calendar year: to December 31, 2017)				
	lendar year before that: to December 31, 2016)				

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Del	otor 1	Huda Eid	Case number (if known)
P	art 3:	List Certain Payments You Made Before You	ı Filed for Bankruptcy
6.	Are eith	ther Debtor 1's or Debtor 2's debts primarily consumer de	ebts?
	□ No.	o. Neither Debtor 1 nor Debtor 2 has primarily consume "incurred by an individual primarily for a personal, family	r debts. Consumer debts are defined in 11 U.S.C. § 101(8) as or household purpose."
		During the 90 days before you filed for bankruptcy, did yo	ou pay any creditor a total of \$6,425* or more?
		☐ No. Go to line 7.	
		total amount you paid that creditor. Do not incli	al of \$6,425* or more in one or more payments and the ude payments for domestic support obligations, such as payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/19 and every 3 years aft	er that for cases filed on or after the date of adjustment.
	√ Yes	es. Debtor 1 or Debtor 2 or both have primarily consume	r debts.
		During the 90 days before you filed for bankruptcy, did yo	ou pay any creditor a total of \$600 or more?
		✓ No. Go to line 7.	
		Yes. List below each creditor to whom you paid a tot creditor. Do not include payments for domestic Also, do not include payments to an attorney for	support obligations, such as child support and alimony.
7.	Insiders corporat agent, ir	rations of which you are an officer, director, person in control,	ayment on a debt you owed anyone who was an insider? y general partners; partnerships of which you are a general partner; or owner of 20% or more of their voting securities; and any managing 1. 11 U.S.C. § 101. Include payments for domestic support obligations
	☑ No ☐ Yes	o es. List all payments to an insider.	
8.		n 1 year before you filed for bankruptcy, did you make any ited an insider?	payments or transfer any property on account of a debt that
	Include	e payments on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes	o es. List all payments that benefited an insider.	

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Debto	r 1	Huda Eid		Case number (if k	known) _		
Par	t 4:	Identify Legal Action	ons, Repossessions, and F	Foreclosures			
L	ist all s	•	bankruptcy, were you a party ir sonal injury cases, small claims aces.	•		-	-
5	_	. Fill in the details.					
Case			Nature of the case	Court or agency		Status	of the case
Midla	ınd Fu	nding LLC v Huda Eid	Collections	Will County Circuit Court Name	Court		✓ Pending
							─ On appeal
Casa	numhai	r 2017 SC 2015		Number Street			☐ Concluded
Oasc i	Harribe	2017 30 2013					<u> П</u> облегааса
				City	State	ZIP Code	
Case	title		Nature of the case	Court or agency		Status	s of the case
Portf	olio R	ecovery v Huda Eid		Will County Circuit	Clerk		□ Pending
				Court Name			
				Number Street			On appeal
Case	numbei	2016 SC 1569					
				City	State	ZIP Code	
s	eized,	I year before you filed for or levied? all that apply and fill in the or	bankruptcy, was any of your pr	operty repossessed, foreclose	d, garnis	shed, attached,	
<u> </u>	,	Go to line 11. Fill in the information bel	ow.				
		-	or bankruptcy, did any creditor, refuse to make a payment becau	_	stitution	, set off any	
_	☑ No ☐ Yes	. Fill in the details.					
		-	bankruptcy, was any of your pr liver, a custodian, or another off		assigne	e for the benefit	of
<u> </u>	☑ No □ Yes						

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Deb	otor 1	Huda Eid	Case number (if known)
P	art 5:	List Certain Gifts and Contributions	
13.	Within 2	2 years before you filed for bankruptcy, did you give any gifts with a t	otal value of more than \$600 per person?
	✓ No ☐ Yes	. Fill in the details for each gift.	
14.	Within 2 to any c	e years before you filed for bankruptcy, did you give any gifts or cont charity?	ributions with a total value of more than \$600
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.	
P	art 6:	List Certain Losses	
15.		year before you filed for bankruptcy or since you filed for bankruptc saster, or gambling?	ry, did you lose anything because of theft, fire,
	✓ No ☐ Yes	. Fill in the details.	
P	art 7:	List Certain Payments or Transfers	
16.		year before you filed for bankruptcy, did you or anyone else acting you consulted about seeking bankruptcy or preparing a bankruptcy	
	•	any attorneys, bankruptcy petition preparers, or credit counseling agencie	
	✓ No ☐ Yes	. Fill in the details.	
17.		year before you filed for bankruptcy, did you or anyone else acting of who promised to help you deal with your creditors or to make payme	
	Do not i	nclude any payment or transfer that you listed on line 16.	
	✓ No ☐ Yes	. Fill in the details.	
18.		Pyears before you filed for bankruptcy, did you sell, trade, or otherwi y transferred in the ordinary course of your business or financial affa	
		both outright transfers and transfers made as security (such as granting onclude gifts and transfers that you have already listed on this statement.	f a security interest or mortgage on your property).
	✓ No ☐ Yes	. Fill in the details.	
19.		0 years before you filed for bankruptcy, did you transfer any propert a beneficiary? (These are often called asset-protection devices.)	y to a self-settled trust or similar device of which
	✓ No ☐ Yes	. Fill in the details.	

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Deb	tor 1	Huda Eid	Case number (if known)
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	sit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or in closed, sold, moved, or transferred?	nstruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates o pension funds, cooperatives, associations, and other financial institutions.	f deposit; shares in banks, credit unions, brokerage
	✓ No ☐ Yes	s. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptc urities, cash, or other valuables?	y, any safe deposit box or other depository
	✓ No ☐ Yes	s. Fill in the details.	
22.	✓ No	ou stored property in a storage unit or place other than your home with	in 1 year before you filed for bankruptcy?
Pa	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	hold or control any property that someone else owns? Include any proin trust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	
Pa	art 10:	Give Details About Environmental Information	
For	the purp	oose of Part 10, the following definitions apply:	
h	azardou	nental law means any federal, state, or local statute or regulation conce us or toxic substance, wastes, or material into the air, land, soil, surface g statutes or regulations controlling the cleanup of these substances, w	water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environmenta or used to own, operate, or utilize it, including disposal sites.	al law, whether you now own, operate, or
		us material means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item.	us waste, hazardous substance, toxic
Rep	ort all n	otices, releases, and proceedings that you know about, regardless of w	hen they occurred.
24.	Has any law?	y governmental unit notified you that you may be liable or potentially lia	able under or in violation of an environmental
	✓ No ☐ Yes	s. Fill in the details.	

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Del	otor 1	Huda Eid	Case number (if known)
25.	☑ No	ou notified any governmental unit of any r	elease of hazardous material?
26.	Have you	ou been a party in any judicial or administ	rative proceeding under any environmental law? Include settlements and
	✓ No ☐ Yes	. Fill in the details.	
Р	art 11:	Give Details About Your Busine	ss or Connections to Any Business
27.	Within 4 busines		d you own a business or have any of the following connections to any
		A sole proprietor or self-employed in a trad A member of a limited liability company (LL A partner in a partnership An officer, director, or managing executive An owner of at least 5% of the voting or eq	of a corporation
	سخا	None of the above applies. Go to Part 12. Check all that apply above and fill in the d	
28.		Pyears before you filed for bankruptcy, di acial institutions, creditors, or other partie	d you give a financial statement to anyone about your business? Include es.
	□ No □ Yes	. Fill in the details below.	
Р	art 12:	Sign Below	
tha pro or I	t answers perty by both. 18	s are true and correct. I understand that r fraud in connection with a bankruptcy ca U.S.C. §§ 152, 1341, 1519, and 3571.	Affairs and any attachments, and I declare under penalty of perjury making a false statement, concealing property, or obtaining money or se can result in fines up to \$250,000, or imprisonment for up to 20 years, X Signature of Debtor 2 Date
			Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
	No Yes		
Did	l you pay	or agree to pay someone who is not an a	ttorney to help you fill out bankruptcy forms?
	No Yes. Na	me of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this info	ormation to i	dentify your case	:	
Debtor 1	Huda		Eid	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: NORTHERN D	DISTRICT OF ILLING	OIS
Case number				
(if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

this is an

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: **List Your Creditors Who Hold Secured Claims**

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

Part 2: **List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

Signature of Debtor 2 Huda Eid, Debtor 1 Date 01/12/2018 MM / DD / YYYY MM / DD / YYYY

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

n re Huda Eid		Case No.	
		Chapter	7
DIS	SCLOSURE OF COMPENSATION C	F ATTORNEY FOR	DEBTOR
that compensation	S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify paid to me within one year before the filing of the or to be rendered on behalf of the debtor(s) in co	e petition in bankruptcy, or a	agreed to be paid to me, for
For legal services,	I have agreed to accept		1,200.00
Prior to the filing of	this statement I have received		1,200.00
Balance Due			\$0.00
2. The source of the o	compensation paid to me was:		
✓ Debtor	Other (specify)		
3. The source of com	pensation to be paid to me is:		
✓ Debtor	Other (specify)		
1. I have not agree	eed to share the above-disclosed compensation my law firm.	with any other person unle	ss they are members and
	to share the above-disclosed compensation with my law firm. A copy of the agreement, together value, is attached.	•	
5. In return for the abo	ove-disclosed fee, I have agreed to render legal	service for all aspects of th	e bankruptcy case, including:
Analysis of the obankruptcy;	debtor's financial situation, and rendering advice	to the debtor in determining	g whether to file a petition in
b. Preparation and	d filing of any petition, schedules, statements of a	iffairs and plan which may b	pe required;
c Penrecentation	of the debtor at the meeting of creditors and con	firmation hearing, and any	adjourned hearings thereof:

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/12/2018

Date

Michael Forkan

Bar No. 6284808

Michael Forkan

Forkan Law Office

2519 N California Avenue

Chicago, Illinois 60647

Phone: (312) 532-2230 / Fax: (877) 880-9987

Huda Fid

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Huda Eid CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 1/12/20	18 Signature	no Ole
	•	Huda-Eid
Date	Signature	

Amex
Po Box 297871
Fort Lauderdale, FL 33329

Bk Of Amer Po Box 982238 El Paso, TX 79998

Capital One 15000 Capital One Dr Richmond, VA 23238

Cavalry Portfolio Serv Po Box 27288 Tempe, AZ 85285

Comenity Bank/carsons Po Box 182789 Columbus, OH 43218

Credit First N A 6275 Eastland Rd Brookpark, OH 44142

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

Syncb/jcp Po Box 965007 Orlando, FL 32896 Case 18-00992 Doc 1 Filed 01/12/18 Entered 01/12/18 17:04:30 Desc Main Document Page 50 of 53

Syncb/walmart Po Box 965024 Orlando, FL 32896

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Fil	l in this inf	ormation to	identify your case:			box only as direc		
Del	btor 1	Huda		Eid	form and	in Form 122A-1Su	pp:	
		First Name	Middle Name	Last Name	1. There is	no presumption of abus	e.	
	btor 2 oouse, if filing)	First Name	Middle Name	Last Name	of abuse	ulation to determine if a applies will be made ur est Calculation (Official	nder Chapter 7	
Uni	ited States Ba	nkruptcy Court fo	or the: NORTHERN DI	STRICT OF ILLINOIS		ns Test does not apply	,	
	se number known)					ed military service but it		
					☐ Check if t	his is an amended filing	J	
Offi	icial Form	122A-1						
Ch	apter 7 S	tatement c	of Your Current	Monthly Income			12/15	
are e milita 122 <i>A</i>	exempted from ary service, c A-1Supp) with	n a presumptio omplete and file this form.	n of abuse because yo	, write your name and case r u do not have primarily cons ion from Presumption of Abu	umer debts or be	ecause of qualifying	ou/ou	
1.	What is your	marital and filir	ng status? Check one o	nlv.				
	-		umn A, lines 2-11.	,.				
				Lout both Columns A and P. li	noo 2 11			
	<u> </u>			I out both Columns A and B, li				
	☑ Livi	ng in the same	household and are not	legally separated. Fill out bo	th Columns A and	d B, lines 2-11.		
	dec	lare under penal	ty of perjury that you and	 Fill out Column A, lines 2-11: d your spouse are legally sepa that do not include evading th 	rated under nonb	ankruptcy law that appli	es or that you	
	bankruptcy c August 31. If in the result.	ase. 11 U.S.C. the amount of your Do not include a	§ 101(10A). For examp our monthly income variency income amount more	ed from all sources, derived on the color of	per 15, the 6-mon e income for all 6 oth spouses own t	th period would be Marc months and divide the he same rental property	ch 1 through total by 6. Fill	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
	•	rages, salary, ti roll deductions)	ps, bonuses, overtime,	and commissions	\$0.00	\$3,500.00		
	Alimony and if Column B is		ayments. Do not includ	e payments from a spouse	\$0.00	\$0.00		
	expenses of y regular contrib your depende	you or your depoutions from an units, parents, and	e which are regularly poendents, including chi unmarried partner, memb d roommates. Include re not filled in. Do not inclu	Id support. Include pers of your household, egular contributions from	\$0.00	\$0.00		

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Deb	otor 1	Huda Eid			c	ase number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
5.	Net inc	ome from operating a busine	ess, profession, o	r farm				
			Debtor 1	Debtor 2				
	Gross r deducti	receipts (before all ons)	\$0.00	\$0.00				
	Ordinar expens	ry and necessary operating — es	\$0.00	\$0.00	Сору			
		nthly income from a business, ion, or farm	\$0.00	\$0.00	here →	\$0.00	\$0.00	
6.	Net inc	ome from rental and other re						
			Debtor 1	Debtor 2				
	Gross r deducti	receipts (before all ons)	\$0.00	\$0.00				
	Ordinar expens	y and necessary operating — es		\$0.00	Сору			
		nthly income from rental or eal property	\$0.00	\$0.00	here →	\$0.00	<u>\$0.00</u>	
7.	Interes	t, dividends, and royalties				\$0.00	\$0.00	
8.	Unemp	loyment compensation				\$0.00	\$0.00	
		enter the amount if you contenunder the Social Security Act.						
	For you							
	For	your spouse		\$0.0	00_			
9.		on or retirement income. Do not benefit under the Social Security			\$0.00	\$0.00		
10.	amount or paym or interi	e from all other sources not lit. Do not include any benefits nents received as a victim of a national or domestic terrorism. te page and put the total below	received under the war crime, a crime If necessary, list c					
	Total ar	mounts from separate pages, i	f any.		+		+	
11.	Add line	ate your total current monthly es 2 through 10 for each colum dd the total for Column A to the	nn.	3.		\$0.00	+ \$3,500.00 = \$3,500.00 Total current monthly income	_

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Deb	tor 1	Hu	uda Eid		Case number (if known)						
Ρ	art 2:		Determine Whether the Means T	est Applies to You							
12.	Calcu	ulate	your current monthly income for the ye	ear. Follow these steps:							
	12a. Copy your total current monthly income from line 11			line 11	Copy line 11 here → 12a. \$3,500.00]					
		Multiply by 12 (the number of months in a year).			X 12	_					
	12b.	2b. The result is your annual income for this part of the form.			12b. \$42,000.00						
13.	Calculate the median family income that applies to you. Follow these steps:										
	Fill in	the s	state in which you live.	Illinois							
	Fill in	the n	number of people in your household.	5							
	Fill in the median family income for your state and size of household										
			st of applicable median income amounts, s for this form. This list may also be avai			•					
14.	How	do th	ne lines compare?								
	14a.										
	14b.		Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	pp of page 1, check box 2, The	presumption of abuse is determined by Form 122A-2.						
P	art 3:		Sign Below								
	Ву s Х _	signin		x	tement and in any attachments is true and correct.						
	[Date_	1/12/2018	Date	MM / DD / Y000/						
	16.	1-	MM / DD / YYYY	·· 4004 0	MM / DD / YYYY						
	It va	NII Cha	acked line 1.4a do NOT fill out or file Forr	カコンフムーン							

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.